

# Report to the Meeting of the

**BOD 55/2018**

(Agenda item: 12)

# Oxford Health NHS Foundation Trust

# Board of Directors

**25th April 2018**

**Human Resources Report**

**For: Information**

This report shows the position on the workforce performance indicators as at the end of March 2018.

The report includes brief details of actions already in place to address some of the challenges as well as plans being developed.

**Temporary Staffing Spend**

Although agency spend remains high, the centralisation of the management of all agency use has removed the traditional spike in agency costs in the last month of the financial year which was previously caused by accrual issues. Good work by the Staffing Solutions, Finance and Procurement teams has led to this improvement.

Total temporary staffing spend figures are detailed in the presentation that accompanies this report. In summary it has increased by £469K to £3.96m, 19.40% of payroll, the highest in year. This is likely to be due to increased rates of annual leave in March due to the end of the annual leave year and Easter.

The Trust is planning to review the annual leave policy in 2018/19 to examine ways of ensuring annual leave is managed more evenly across the year.

Agency spend was 171.84% above the ceiling set by NHSI. NHSI Agency rule overrides increased by 10% to 1,380 shifts in the 4 weeks of March. 54% of temporary staffing shifts booked through the WFMS were to cover vacancies.

**HCA Agency Reduction**

We continue to work hard to get more Healthcare Assistants onto our Bank and our substantive payroll ahead of the planned cessation of agency use for these roles across the Trust in mid-May. Extensive work is being undertaken to persuade Agency Workers to move across to Staffing Solutions, the Trusts' internal bank. The Staffing Solutions and recruitment teams are currently visiting inpatient units targeting visits to catch key agency HCA workers to try and persuade them to join the internal bank.

As neither Staffing Solutions nor HR hold any contact details for agency workers, the only viable means of contacting agency workers about transferring to a Trust contract is when they are actually at work. Therefore, it is vital that all Ward Managers and Nurses in Charge of a shift also encourage agency workers to make the move to enable the Trust to smoothly transition to no HCA agency usage.

87% of the shifts filled by agency workers in January were completed by 125 workers who are being specifically targeted to move across. The table below shows progress with this key group and with other workers:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Key** | **Other** | **Total** |
| Number of Agency Workers | 125 | 260 | 385 |
| Number Spoken to | 88 | 59 | 110 |
| Positive response | 60 | 48 | 79 |
| ESR assignment set up ready to commence work from 14 May or earlier | 33 | 16 | 29 |
| Negative response | 12 | 2 | 14 |
| Unsure | 10 | 7 | 17 |

In March 44 Pure Flexible offers were made with 37 workers able to start. 27 Substantive Flexible Worker assignments have been processed.

Since the Work for Us challenge started in September, 188 new Pure Flexible Workers have started and 381 substantive Flexible Worker contracts have been issued.

**Vacancy**

The Vacancy rate has increased 13.8% in March from 11.0% in February. The increase has resulted from the addition of 168.6 FTE to the Budgeted WTE figure and has been experienced across all directorates except Children & Young Peoples.

A table showing the volume of current recruitment activity is included in the presentation which accompanies this report.

**Turnover**

The Turnover figure has increased in March to stand at 14.92%. The increase has been driven by the Corporate and Adult directorates. However, the Older Peoples and Children and Young People directorates have displayed a long term decline over the last 6 months. This is unfortunately above the 14.5% target that we had hoped to achieve by the end of the financial year.

**Sickness**

Sickness has decreased significantly to stand at 4.15% compared to 5.21% last month. The decrease has been experienced across all directorates and has been driven by the end of the winter illnesses and a reduction in Stress related absence.

**Recruitment**

Recruitment recently facilitated an HCA career open day in Oxford at which most services were represented. Attendees are being contacted to progress to an application for either substantive or flexible working. 3 attendees were from existing members of our housekeeping staff and a career pathway should be considered. A similar event for nurses and return to practice nursing has been scheduled for 9th June in Oxford.

There has been no progress on recruiting staff from Douglas House. We understand that redundancies are still anticipated and we remain in contact with the Unions who are supporting staff.

Recruitment Team would like to be in a position to offer a flexible contract to each new recruit to the Trust in at least the inpatient units. There would have a cost impact with pay for each new contract but would save time and cost in the longer term and staff would be available for additional hours immediately. This will be achievable when some non-recruitment activities are undertaken elsewhere in the wider HR team. This is likely to be mid-year but we will start all student nurses with a flexible contract alongside their substantive contract.

**Management of Concerns (Whistle Blowing)**

1. “open” case. The investigation has been commenced.

**Miscellaneous:**

The Trust’s Gender Pay Gap report was published and was discussed with stakeholder groups including Board, Staff Side and Executive team.

In February the HR Advisory Team introduced a central phone number for HR Advice. Call volumes are averaging 150 per month and mainly come from employees of the Trust raising general enquiries. This indicates an improvement to the service as previously staff had no means of directly accessing HR.

The Trust has offered the Freedom to Speak Up role (successor to Mike Foster) to a candidate who should be able to start in May.

**Recommendation**

To note the report for information.

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